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## BIB DATA SHEET

CONFIRMATION NO. 3546

<b>SERIAL NUMBER</b> 09/447,227	<b>FILING or 371(c) DATE</b> 11/22/1999 <b>RULE</b>	<b>CLASS</b> 600	<b>GROUP ART UNIT</b> 3735	<b>ATTORNEY DOCKET NO.</b> DEXCOM.008DV1		
<b>APPLICANTS</b> MARK C. SHULTS, MADISON, WI; STUART J. UPDIKE, MADISON, WI; RATHBUN K. RHODES, MADISON, WI; <b>** CONTINUING DATA *****</b> This application is a DIV of 08/811,473 03/04/1997 PAT 6,001,067 <b>** FOREIGN APPLICATIONS *****</b> <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 12/15/1999						
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and Acknowledged <u>/ROBERT L. NASSER/</u> Examiner's Signature		<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> WI	<b>SHEETS DRAWINGS</b> 9	<b>TOTAL CLAIMS</b> 7	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> KNOBBE, MARTENS, OLSEN & BEAR, LLP 2040 MAIN STREET FOURTEENTH FLOOR IRVINE, CA 92614 UNITED STATES						
<b>TITLE</b> DEVICE AND METHOD FOR DETERMINING ANALYTE LEVELS						
<b>FILING FEE RECEIVED</b> 785	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit			